

Save

Print

CSES PROPOSAL COVER SHEET

Instructions: Submit the cover sheet with your CSES proposal as attachments to CSES Proposals@lanl.gov. This form is Unclassified and should NOT include classified information.

Do not use MAC Preview tool to complete this form as the tool causes data corruption issues.

	oor to complete this joint as t			
Proposal Title (required):				
Proposal Discipline (select all that apply):	Astrophysics and Cosmology	Climate	Geosciences	Space
Proposed Start Date & Duration (required):	Start Date:	Duratio	า	
Total Cost by Fiscal Year:				
LANL Principal Investigator				
Last Name:	First Name:			
Email:				
University Principal Investigator (for Student Fellow Program only)				
Last Name:	First Name:			
University & Campus:	Department:			
Address:				
Email:	Phone:			
Other Investigator(s) Name (last, first), Department, Address, Email, Phone:				
PostDoc or Graduate Student(s) Name, Emai	l:			
PostDoc or Graduate Student(s) Name, Emai	l:			
PostDoc or Graduate Student(s) Name, Emai	l:			
PostDoc or Graduate Student(s) Name, Emai	l:			
PostDoc or Graduate Student(s) Name, Emai	l:			

Submit completed form and your CSES proposal to CSES Proposals@lanl.gov. This form is Unclassified and should **NOT** include classified information.

Save

Email to CSES Proposals@lanl.gov